

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) Michael L. Kelley county commissioner
 Office (if applicable)
 District (if applicable) 2
 Mailing Address (include city and zip code) 3655 Lyon Ln. CC, NV 89704
 Telephone No. 775 849-3615
 E-Mail Address Mike.L.kelley@charter.net

Select Appropriate Box(es)
☒ CANDIDATE ☐ PAC ☐ POL PRTY ☐ IND EXP ☐ NONPROFIT CORP
☐ LEGAL DEFENSE FUND ☐ AMENDED ☐ LOCAL BAG

- ☐ Annual Filing - Due January 15, 2010
 Period: January 1, 2009 - December 31, 2009
- ☐ Report #1 - Due June 1, 2010*
 Period: Jan. 1, 2010 - May 27, 2010
- ☒ Report #2 Due - October 26, 2010*
 Period: May 28, 2010 - Oct. 21, 2010
- ☐ Report #3 Due - January 15, 2011**
 Period: Oct. 22, 2010 - Dec. 31, 2010
- ☐ Annual Filing - Due January 15, 2011
 Period: January 1, 2010 - December 31, 2010

* These Reports are filed by incumbents/candidates in the 2010 election cycle
 ** Third Report suffices for 2011 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100
 (See page 1 of instruction sheet)
2. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)
3. Total Monetary Contributions in the form of loans that were forgiven
 (See page 2 of instruction sheet)

This Period

Cumulative From Beginning of Report Period #1 through End of This Reporting Period

4. Total Amount of Monetary Contributions Received
 (Add Lines 1 through 3) (See page 2 of instruction sheet)
5. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))
 (See page 2 of instruction sheet)
6. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)

This Period

Cumulative From Beginning of Report Period #1 Through End of This Reporting Period

EXPENSES SUMMARY

7. Total Monetary Expenses Paid in Excess of \$100
 (See page 2 of instruction sheet)
8. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)

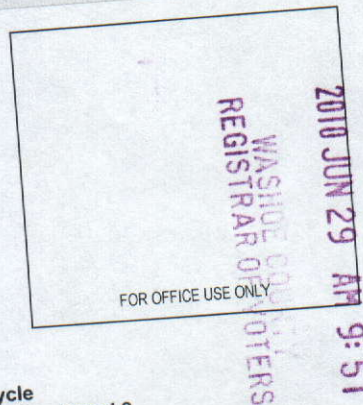
AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Michael Lawrence Kelley
 Signature

Date

6/29/10



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District (if applicable)

[illegible]

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WRITTEN COMMITMENTS

Report Period	#
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Name (print) _____

Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100
Transfer Total Amount of All Written Commitments to Line 5 of Contributions Summary

[illegible]

This page may be copied or duplicated if additional space is needed.

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100**Transfer Total Amount of All Campaign Expenses to Line 7 of Expenses Summary**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE

This page may be copied or duplicated if additional space is needed.

IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

**IN KIND CAMPAIGN
CONTRIBUTIONS**Report Period **#**

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

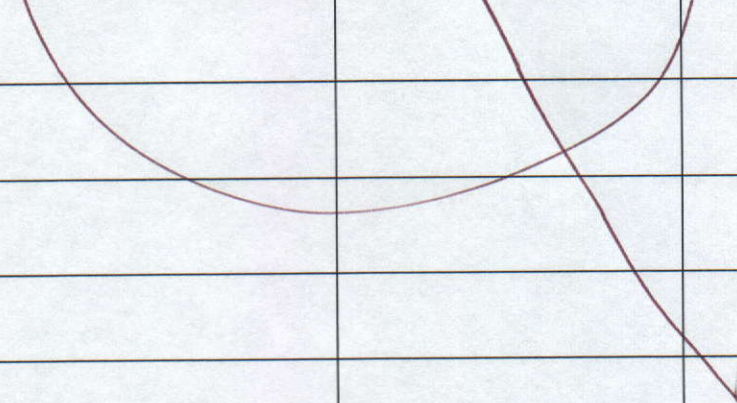
**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 6 of Contributions Summary**

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN

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Report Period	#
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District (if applicable)

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT
		

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**IN KIND CAMPAIGN
EXPENSES**

Report Period #

Name (print)

Office (if applicable)

District (if applicable)

IN KIND**Expenses in Excess of \$100**

Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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Prescribed by Secretary of State
NRS 294A.120, 294A.125,
294A.140, 294A.150, 294A.160
294A.200, 294A.210, 294A.220, 294A.362

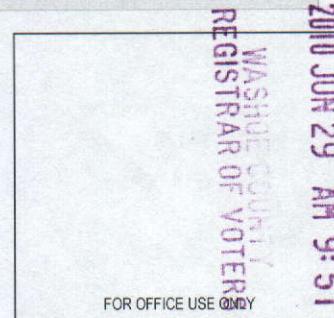
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CONTRIBUTIONS SUMMARY

	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100 (See page 1 of instruction sheet)	0	0
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3. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	0	0
4. Total Amount of Monetary Contributions Received (Add Lines 1 through 3) (See page 2 of instruction sheet)	0	0
5. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) (See page 2 of instruction sheet)	0	0
6. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)	0	0

EXPENSES SUMMARY

7. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)	0	0
8. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	0	0

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature Michael Lawrence Kelley Date 6/29/10

Report Period	#
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District (if applicable)

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Report Period	#
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District (if applicable)

[illegible]

PAGE 3 OF 9

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

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Other miscellaneous expenses	J

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Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 7 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE

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Report Period	#
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District (if applicable)

**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100
Transfer Total Value of All In-Kind Campaign Contributions to Line 6 of Contributions Summary**

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Report Period	#
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District (if applicable)

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PAGE 8 OF 9

**IN KIND CAMPAIGN
EXPENSES**

Report Period #

Name (print)

Office (if applicable)

District (if applicable)

IN KIND**Expenses in Excess of \$100****Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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Prescribed by Secretary of State
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